## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10003509-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

oatent is sought on System And Method	the inventio I For Recove	n entitled: ering From Memory Fail	ures In Computer S	ystems
the specification of	which is att	ached hereto unless th	e following box is cl	necked:
( ) was filed on Number	and w	as US Applic	ation Serial No. or P	CT International Application applicable).
hereby state that	I have revi	ewed and understood	the contents of th	e above-identified specification ve. I acknowledge the duty to
inventor(s) certificate list	riority benefits ed below and	under Title 35 United Stat	ny foreign application for	any foreign application(s) for patent of patent or inventor(s) certificate having
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
				YES: NO:
				YES: NO:
Provisional Application hereby claim the bene pelow:	fit under Title	35, United States Code Sec	tion 119(e) of any Unit	ed States provisional application(s) liste
Jelow.	API	PLICATION SERIAL NUMBER	FILING DATE	
	-			
manner provided by the information as defined it	first paragrap Title 37, Coo	h of Title 35 United States	Code Section 112, I ac ection 1.56(a) which occ pplication:	the prior United States application in the knowledge the duty to disclose materi- urred between the filing date of the prio
APPLICATION SERIAL	NUMBER	FILING DATE	STATU!	6 (patented/pending/abandoned)
POWER OF ATTORNEY: As a named inventor, business in the Patent a	I hereby appo	int the following attorney(s Office connected therewith:	and/or agent(s) to pro	osecute this application and transact a
Custo	mer Number	022879	Place Customer Number Bar Code Label here	
Send Corresponden HEWLETT-PACKARI Intellectual Property P.O. Box 272400 Fort Collins, Colorac	D COMPANY Administration		Direct Telepho Lloyd E. Dakin (650) 857-229	, Jr.
I hereby declare the made on information the knowledge that or both under Sec	nat all state on and belia t willful fal-	ments made herein of	ie; and further that like so made are pu id States Code and	e are true and that all statemen these statements were made wi nishable by fine or imprisonmer that such willful false statemen n.
Full Name of Inventor:			Citizenship:	
Residence:	3989 La	Donna Avenue Pal	Alto, CA 9430	6-3155
Post Office Address:		Residence	( 10	. 1 -
Dejan 5. Us inventor's Signature	ilizi eie		- 4/30	1200/
,		Page Two For Additional Invento	Date	Page 1 of 1
Rev 10/00 (DecPwr)	(Use	Page Two For Additional Invento	rist diffirermers))	ragerori

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

Full Name of # 2 joint inventor:	Thomas Wylegala		Citizenship:	us			
Residence:	Californi	a 95051					
	Same As Residence						
Post Office Address:							
Inventor's Signature		Date					
Full Name of # 3 joint inventor:	Fong Pong		Citizenship:	TW			
Residence:	150 Bryant Avenue, Mountain View, California 94040						
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Foot Office Address.							
Inventor's Signature		Date					
Full Name of # 4 joint inventor:	Stephen Hoyle		Citizenship:	US			
Residence:	488 Maureen Avenue Palo Alto CA 94306						
Post Office Address:	Same as residence						
rost Office Address.							
Inventor's Signature		Date					
Full Name of # 5 joint inventor	: Lance W. Russell		Citizenship:	US			
Residence:	1290 Versailles Dr. Hollister CA	95023					
Post Office Address:	Same as residence						
Inventor's Signature		Date					
Full Name of # 6 joint inventor	: Lu Xu		Citizenship:_	CN			
Residence:	1252 Oak Knoll Drive San Jose, CA 95129						
Post Office Address:	Same as Residence						
Inventor's Signature		Date					
Full Name of # 7 joint inventor	: Alberto J. Munoz		Citizenship:	us			
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Post Office Address:	Same as Residence						
Inventor's Signature		Date					
Full Name of # 8 joint invento	r:		Citizenship:				
Residence:							
Post Office Address:							
Inventor's Signature		Date					